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UNITED STATES PATENT AND TRADEMARK OFFICE
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Bib Data Sheet

CONFIRMATION NO. 5169

SERIAL NUMBER 09/755,714	FILING DATE 01/05/2001 RULE	CLASS 340	GROUP ART UNIT 2635	ATTORNEY DOCKET NO. 55350US6B014
APPLICANTS David T. Berquist, St. Paul, MN; Peter M. Eisenberg, Minneapolis, MN; Mitchell B. Grunes, Minneapolis, MN; Robert J. Schilling, Arden Hills, MN;				
** CONTINUING DATA ***** THIS APPLICATION IS A CIP OF 09/484,370 01/14/2000 yes				
** FOREIGN APPLICATIONS ***** <div style="text-align: center; font-family: cursive; font-size: 1.2em;">NONE</div>				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 02/16/2001				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged MTO Examiner's Signature _____ Initials _____		STATE OR COUNTRY MN	SHEETS DRAWING 3	TOTAL CLAIMS 38
		INDEPENDENT CLAIMS 12		
ADDRESS Attention: Peter L. Olson Office of Intellectual Property Counsel 3M Innovative Properties Company P.O. Box 33427 St. Paul, MN 55133-3427				
TITLE User interface for portable rfid reader				
FILING FEE RECEIVED 1754	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<div style="border: 1px solid black; padding: 2px;"> <input type="checkbox"/> All Fees </div> <div style="border: 1px solid black; padding: 2px;"> <input type="checkbox"/> 1.16 Fees (Filing) </div> <div style="border: 1px solid black; padding: 2px;"> <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) </div> <div style="border: 1px solid black; padding: 2px;"> <input type="checkbox"/> 1.18 Fees (Issue) </div> <div style="border: 1px solid black; padding: 2px;"> <input type="checkbox"/> Other _____ </div> <div style="border: 1px solid black; padding: 2px;"> <input type="checkbox"/> Credit </div>	



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		INDEPENDENT CLAIMS 12		
ADDRESS 32692				
TITLE User interface for portable rfid reader				
FILING FEE RECEIVED 1754	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	